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OCT 02 2007

PTO/SB/17 (07-07)

Approved for use through 08/30/2010. OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). <b>FEE TRANSMITTAL</b> <b>For FY 2007</b>		<b>Complete if Known</b> Application Number 10/026,358-Conf. #8071 Filing Date December 24, 2001 First Named Inventor Brjesh AGARWAL Examiner Name F. Poinvil Art Unit 3692 Attorney Docket No. 1497210.00122US2	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
TOTAL AMOUNT OF PAYMENT (\$) 1,280.00			

**METHOD OF PAYMENT (check all that apply)**

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_  
☒ Deposit Account Deposit Account Number: 08-0219 Deposit Account Name: Wilmer Cutler Pickering Hale and  
 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  
☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee  
☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES**

Fee Description	Small Entity Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
4	1	200	210.00

HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(a).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)

- 100 = / 50 = (round up to a whole number) x


**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 1253 Extension for response within third month

Fees Paid (\$)

1,050.00

<b>SUBMITTED BY</b>		<b>Registration No.</b>	<b>Telephone</b>
Signature		35,120	(212) 230-8800
Name (Print/Type)	Irsh H. Donner	<b>Date</b>	October 2, 2007

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted by facsimile to the Patent and Trademark Office, facsimile no. (571) 273-8300, on the date shown below.

Dated: October 2, 2007

Signature:  (Irsh H. Donner)

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CENTRAL FAX CENTER****OCT 02 2007****FAX TRANSMISSION****DATE:** October 2, 2007**PTO IDENTIFIER:** Application Number 10/026,358-Conf. #8071  
Patent Number**Inventor:** Brijesh AGARWAL et al.**MESSAGE TO:** US Patent and Trademark Office**FAX NUMBER:** (571) 273-8300**FROM:** WILMER CUTLER PICKERING HALE AND DORR LLP

Irah H. Donner

**PHONE:** (212) 230-8800**Attorney Dkt. #:** 1497210.00122US2**PAGES (Including Cover Sheet):** 27**CONTENTS:**

Fee Transmittal (1 page)  
Three Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)  
Response under 37 C.F.R. §1.111 (21 pages)  
Transmittal (1 page)  
Applicant Initiated Interview Request form (1 page)  
Fax cover sheet and Certificate of Transmission (2 pages)  
Charge \$1,260.00 to deposit account 08-0219

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**WILMER CUTLER PICKERING HALE AND DORR LLP**  
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PTO/SB/97 (09-04)

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Application No. (if known): 10/026,358

Attorney Docket No.: 1497210.00122US2

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Fee Transmittal (1 page)

Three Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)

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PTO/SB/21 (04-07)

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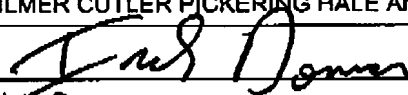
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<h1>TRANSMITTAL FORM</h1> <p><small>(to be used for all correspondence after initial filing)</small></p>		Application Number	10/026,358-Conf. #8071
		Filing Date	December 24, 2001
		First Named Inventor	Brijesh AGARWAL
		Art Unit	3692
		Examiner Name	F. Poinvil
Total Number of Pages in This Submission	27	Attorney Docket Number	1497210.00122US2

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Applicant Initiated Interview Request form Fax cover sheet and Certificate of Transmission
Remarks: _____		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	WILMER CUTLER PICKERING HALE AND DORR LLP		
Signature			
Printed name	Irab H. Donner		
Date	October 2, 2007	Reg. No.	35,120

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Dated: October 2, 2007

Signature:  (Irab H. Donner)

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OCT 02 2007

PTOL-413A (07-07)

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U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

### Applicant Initiated Interview Request Form

Application No.: 10/026,358-Conf. #8071 First Named Applicant: Brijesh AGARWAL  
Examiner: F. Poinvil Art Unit: 3692 Status of Application: Published

#### Tentative Participants:

(1) Irah Donner (2) Jason Skinder  
(3) \_\_\_\_\_ (4) \_\_\_\_\_

Proposed Date of Interview: TBD Proposed Time: TBD (AM/PM)

#### Type of Interview Requested:

(1) ☐ Telephonic (2) ☒ Personal (3) ☐ Video Conference

Exhibit To Be Shown or Demonstrated: ☒ YES ☐ NO

If yes, provide brief description: Video demonstration of operation of invention

### Issues To Be Discussed

Issues (Rej., Obj., etc)	Claims/ Fig. #s	Prior Art	Discussed	Agreed	Not Agreed
(1) <u>Rej.</u>	<u>1-23</u>	<u>Lawrence</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(2) _____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(3) _____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(4) _____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Continuation Sheet Attached

#### Brief Description of Arguments to be Presented:

Differentiation of present invention over the prior art

An interview was conducted on the above-identified application on \_\_\_\_\_

#### NOTE:

This form should be completed by applicant and submitted to the examiner in advance of the interview (see MPEP §713.01).

This application will not be delayed from issue because of applicant's failure to submit a written record of this interview. Therefore, applicant is advised to file a statement of the substance of this interview (37 CFR 1.133(b)) as soon as possible.

Irah H. Donner  
Applicant/Applicant's Representative Signature

\_\_\_\_\_  
Examiner/SPE Signature

Irah H. Donner  
Typed/Printed Name of Applicant or Representative

35,120  
Registration Number, if applicable